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## Facsimile Cover Sheet

**MEDTRONIC LAW DEPARTMENT - CONFIDENTIAL****Attention:** Centralized Fax Number**Company:** United States Patent and Trademark Office**Telephone:****Facsimile:** 571-273-8300**Application No.:** 10/698,874**Filing Date:** October 31, 2003**From:** Anna M. Nelson**Telephone:** 763-505-0409**Facsimile:** 763-505-0411**Our Ref. No.:** P-10183.02US**Date:** November 28, 2005**Pages (including cover page):** 11

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1. Transmittal form
2. Communication to Examiner

Anna M. Nelson

Reg. No. 48,935

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NO. 5997 P. 2

NOV 28 2005

PTO/SB/21 (08-04)

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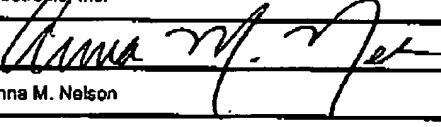
Total Number of Pages in This Submission

Application Number	10/695,874
Filing Date	October 31, 2003
First Named Inventor	Francesco Greco
Art Unit	3736
Examiner Name	not assigned yet
Attorney Docket Number	P-10183.02US

## ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> <input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

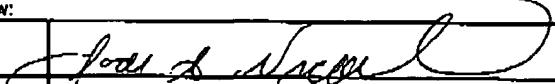
## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Medtronic Inc.		
Signature			
Printed name	Anna M. Nelson		
Date	November 28, 2005	Reg. No.	48,935

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Date

November 28, 2005

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PATENT  
Docket No.: P-10183.02US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Francesco Greco      Group Art Unit: 3736  
Application No.: 10/698,874      Examiner: Not assigned net  
Filing Date: 10/31/2003  
For: Catheter System Having Disposable Balloon

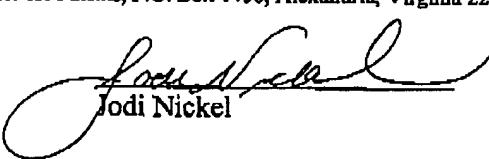
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COMMUNICATION

Based on an office action for related case 10/698,888 that was recently received, it appears that there may be some confusion regarding the pending claims.

In light of the transmittal letter filed with the application, indicating claims 1-19 and 31 were cancelled, claims 20-30 and 32-48 are currently pending in this application. For convenience, a copy of the pending claims is attached hereto.

Pending Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 9 of this paper.